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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	AL01348K1
	First Named Inventor	ASLANIAN et al.
	COMPLETE IF KNOWN -	
	Application Number	09 / 978267
	Filing Date	October 15, 2001
	Group Art Unit	1614
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Novel NON-IMIDAZOLE COMPOUNDS

the specification of which
☐ is attached hereto
 OR
☒ was filed on (MM/DD/YYYY) **October 15, 2001** as United States Application Number or PCT International Application Number **09/978267** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/240,901	10/17/2000

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 Of 6)

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: February 14, 2002			
Typed or printed name	HENRY C. JEANETTE		
Signature	<i>Henry C. Jeanette</i>	Date	February 14, 2002

Express Mail Label No.

Date

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input checked="" type="checkbox"/> Customer Number 24265				Place Customer Number Bar Code Label here
OR				
<input type="checkbox"/> Registered practitioner(s) name/registration number listed below				
Name	Registration Number	Name	Registration Number	

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 24265 OR ☐ Correspondence address below

Name	Henry C. Jeanette Reg. No. 30,856				
Address					
Address					
City		State		ZIP	
Country		Telephone	(908) 298-5041	Fax	(908) 298-5388

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Robert G.	ASLANIAN

Inventor's Signature				Date	
Residence: City	Rockaway	State	NJ	Country	USA
				Citizenship	USA
Post Office Address	144 Philip Drive				
Post Office Address					
City	Rockaway	State	NJ	ZIP	07866
				Country	USA

☒ Additional inventors are being named on the 4 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Please type a plus sign (+) inside this box → ☐

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Neng-Yang		Shih	
Inventor's Signature		Date	
Residence: City North Caldwell	State NJ	Country USA	Citizenship USA
Mailing Address 1 Maple Avenue			
Mailing Address			
City North Caldwell	State NJ	ZIP 07006	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Pauline C.		Ting	
Inventor's Signature		Date	
Residence: City New Providence	State NJ	Country USA	Citizenship USA
Mailing Address 74 Delwick Lane			
Mailing Address			
City New Providence	State NJ	ZIP 07974	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael Y.		Berlin	
Inventor's Signature		Date	
Residence: City Flemington	State NJ	Country USA	Citizenship Russia
Mailing Address 14 Hendrick Road			
Mailing Address			
City Flemington	State NJ	ZIP 08822	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>4</u> of <u>6</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Stuart B.		Rosenblum	
Inventor's Signature		Date	
Residence: City West Orange	State NJ	Country USA	Citizenship USA
Mailing Address 16 Steven Terrace			
Mailing Address			
City West Orange	State NJ	ZIP 07052	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kevin D.		McCormick	
Inventor's Signature		Date	
Residence: City Edison	State NJ	Country USA	Citizenship USA
Mailing Address 5 Pace Drive			
Mailing Address			
City Edison	State NJ	ZIP 08820	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Wing C.		Tom	
Inventor's Signature		Date	
Residence: City Cedar Grove	State NJ	Country USA	Citizenship USA
Mailing Address 133 Cedar Grove Parkway			
Mailing Address			
City Cedar Grove	State NJ	ZIP 07009	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>5</u> of <u>6</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Christopher W.		Boyce	
Inventor's Signature		Date	
Residence: City Flemington	State NJ	Country USA	Citizenship USA
Mailing Address 71 Bonnell Street			
Mailing Address			
City Flemington	State NJ	ZIP 08822	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Pietro		Mangiaracina	
Inventor's Signature		Date	
Residence: City Monsey	State NY	Country USA	Citizenship USA
Mailing Address 4 Montclair Avenue			
Mailing Address			
City Monsey	State NY	ZIP 10952	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Mwangi W.		Mutahi	
Inventor's Signature <i>Mwangi W. Mutahi</i>		Date Feb. 12/2002	
Residence: City Fords	State NJ	Country USA	Citizenship Kenya
Mailing Address 45 Synder Road			
Mailing Address			
City Fords	State NJ	ZIP 08863	Country USA

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 6 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
John J.		Piwinski	
Inventor's Signature		Date	
Residence: City Clinton Township	State NJ	Country USA	Citizenship USA
Mailing Address 6 Saddle Ridge Drive			
Mailing Address			
City Lebanon	State NJ	ZIP 08833	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	AL01348K1		
	First Named Inventor	Aslanian et al.		
	COMPLETE IF KNOWN			
	Application Number	/		
	Filing Date	October 15, 2001		
	Group Art Unit			
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	

As a below named inventor, I hereby declare that:

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NOVEL NON-IMIDAZOLE COMPOUNDS

the specification of which
☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/240,901	10/17/2000	

[Page 1 of 2]

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Typed or printed name		
Signature	Date	

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Date	October 15, 2001

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number 24265
→
Place Customer Number Bar Code Label here

OR

☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 24265 OR ☐ Correspondence address below

Name	Henry C. Jeanette Reg. No. 30,856				
Address					
Address					
City		State		ZIP	
Country		Telephone	(908) 298-5041		Fax (908) 298-5388

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: Robert G. Aslanian ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Robert G.	Aslanian

Inventor's Signature				Date	Oct 15, 2001
Residence: City	Rockaway	State	NJ	Country	USA
Post Office Address	144 Philip Drive				
Post Office Address					
City	Rockaway	State	New Jersey	ZIP	07866
				Country	USA

☒ Additional inventors are being named on the 4 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>6</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Neng-Yang		Shih	
Inventor's Signature <i>Neng-Yang Shih</i>		Date <i>Oct 15, 2001</i>	
Residence: City North Caldwell	State NJ	Country USA	Citizenship USA
Mailing Address 1 Maple Avenue			
Mailing Address			
City North Caldwell	State NJ	ZIP 07006	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Pauline C.		Ting	
Inventor's Signature <i>Pauline C. Ting</i>		Date <i>Oct 15, 2001</i>	
Residence: City New Providence	State NJ	Country USA	Citizenship USA
Mailing Address 74 Delwick Lane			
Mailing Address			
City New Providence	State NJ	ZIP 07974	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael Y.		Berlin	
Inventor's Signature <i>Michael Y. Berlin</i>		Date <i>Oct 15, 2001</i>	
Residence: City Flemington	State NJ	Country USA	Citizenship Russia
Mailing Address 14 Hendrick Road			
Mailing Address			
City Flemington	State NJ	ZIP 08822	Country USA

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>4</u> of <u>6</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Stuart B.		Rosenblum	
Inventor's Signature <i>Stuart B. Rosenblum</i>		Date <i>Oct 15th 2001</i>	
Residence: City West Orange	State NJ	Country USA	Citizenship USA
Mailing Address 16 Steven Terrace			
Mailing Address			
City West Orange	State NJ	ZIP 07052	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kevin D.		McCormick	
Inventor's Signature <i>Kevin D. McCormick</i>		Date <i>Oct 15, 2001</i>	
Residence: City Edison	State NJ	Country USA	Citizenship USA
Mailing Address 5 Pace Drive			
Mailing Address			
City Edison	State NJ	ZIP 08820	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Wing C.		Tom	
Inventor's Signature <i>Wing C. Tom</i>		Date <i>Oct. 15, 2001</i>	
Residence: City Cedar Grove	State NJ	Country USA	Citizenship USA
Mailing Address 133 Cedar Grove Parkway			
Mailing Address			
City Cedar Grove	State NJ	ZIP 07009	Country USA

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>5</u> of <u>6</u>
--------------------	--

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Christopher W.		Boyce	
Inventor's Signature <i>Christopher W. Boyce</i>		Date <i>October 15, 2001</i>	
Residence: City	Flemington	State	NJ
Country	USA	Citizenship	USA
Mailing Address 71 Bonnell Street			
Mailing Address			
City	Flemington	State	NJ
ZIP	08822	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Pietro <i>Pietro</i>		Mangiaracina	
Inventor's Signature <i>Pietro Mangiaracina</i>		Date <i>October 15, 2001</i>	
Residence: City	Monsey	State	NY
Country	USA	Citizenship	USA
Mailing Address 4 Montclair Avenue			
Mailing Address			
City	Monsey	State	NY
ZIP	10952	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Mwangi W.		Mutahi	
Inventor's Signature		Date	
Residence: City	Fords	State	NJ
Country	USA	Citizenship	Kenya
Mailing Address 45 Synder Road			
Mailing Address			
City	Fords	State	NJ
ZIP	08863	Country	USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>6</u> of <u>6</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
John J.		Piwinski	
Inventor's Signature <i>John J. Piwinski</i>		Date <i>Oct 15, 2001</i>	
Residence: City Clinton Township	State NJ	Country USA	Citizenship USA
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City Lebanon	State NJ	ZIP 08833	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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